SCC eFile	2014 ANNUAL REI COMMONWEALTH OF V STATE CORPORATION CO	214500797 <b>DN</b>			
1.) CORPORATION NAME:			DUE DATE:	1/31/2014	
Eagle Life Insurance Compan 2.) VA REGISTERED AGENT NAM CORPORATION SERVICE CO	IE AND OFFICE ADDRESS:		SCC ID NO: <b>F1848433</b>		
Bank of America Center, 16th 1111 East Main Street			5.) STOCK INFORMATION CLASS AUTHORIZED		٦
RICHMOND, VA			COMMON PREFER	25,000,000 5,000,000	
3.) CITY OR COUNTY OF VA REG RICHMOND CITY	SISTERED OFFICE:		FREFER	5,000,000	1
4.) STATE OR COUNTRY OF INCO	ORPORATION:				
6.) PRINCIPAL OFFICE ADDRESS	:				
ADDRESS: 6000 W	ESTOWN PARKWAY				
CITY/ST/ZIP: WES	T DES MOINES, IA 50266				
7.) DIRECTORS AND PRINCIPAL (	OFFICERS: All directors an may be design:	d principal ated as bo	officers must th a director a	be listed. An individed an officer.	dual
NAME.		X OFFIC	ER	X DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN MICHAEL MATOVINA VICE PRESIDENT 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266				
NAME.	DAVID IEEE NODI E	OFFIC	ER	X DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID JEFF NOBLE DIRECTOR 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266				
NAME:	TED JOHNSON	X OFFIC	ER	DIRECTOR	
TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICE PRESIDENT 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBRA JANE RICHARDSON SECRETARY 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	X OFFIC	ER	X DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN ROBERT MILLER ACTUARY 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	X OFFIC	ER	DIRECTOR	
NAME:	IAMES MICHAEL SERVASU	OFFIC	ER	X DIRECTOR	
TITLE: ADDRESS:	JAMES MICHAEL GERLACH DIRECTOR 6000 WESTOWN PARKWAY				

WEST DES MOINES, IA 50266

CITY/ST/ZIP/CO:

				OFFICER	χ DIRECTOR		
	NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY ALLAN REIMER DIRECTOR 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266		1			
	NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY REIMER DIRECTOR 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266		OFFICER	X DIRECTOR		
	NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RON GRENSTEINER PRESIDENT 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	X	OFFICER	X DIRECTOR		
	NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROLE L HUNT VICE PRESIDENT 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	X	OFFICER	DIRECTOR		
	NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM R KUNKEL GEN. COUNSEL 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	X	OFFICER	DIRECTOR		
	NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFF D LORENZEN CIO 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	X	OFFICER	DIRECTOR		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.							
/s/ CAROLE		CAROLE LHUNT,			/4/2013		
	OF DIRECTOR/OFFICER IN THIS REPORT	PRINTED NAME AND CORP	ORAT	E	DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.							